## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10821064

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
_			(Column_1)		(Column 2)		T	TYPE		OR SMALL		ENTITY
TOTAL CLAIMS			70					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			∵		* _		1	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =					X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT		_			+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" i						olumn 2	_	TOTAL	38.1	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL E	NTITY	OR	OTHER SMALL I	
_		(Column 1)	<del></del>	(Colun		(Column 3)		1		1		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·	=	·	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	PENDENT	CLAIM	<u> </u>		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
(1)								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	,	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT	CLAIM			-145=		OR	+290=	
								TOTAL DIT. FEE			TOTAL ADDIT, FEE	•
				. •	•	-0011.1 222	• -					
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	F		ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	>	<b>(\$ 9=</b>		OR	X\$18=	·
	Independent	*	Minus	***		=	5	<b>(43=</b>		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145=				
* H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								!	OR ,	TOTAL ODIT. FEE	
		ber Previously Paid					found i	in the appr	opriate box	in colu	ມກາກ 1.	